

**Associate Membership Application Standards for ACCPs**

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| **Clinical core competences** | | |
| **Resuscitation and first stage management of the critically ill patient** | | |
| Is able to perform independently | Can recognise, assess, stabilise and manage a critically ill patient who has acutely deteriorated or collapsed |  |
| Can diagnose and manage cardiopulmonary resuscitation to advanced life support provider level to include the management of common arrhythmias |  |
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| Can triage and prioritise patients appropriately within the critical care environment |  |
| Is able to perform under direct or indirect supervision | Can manage the post-resuscitation period including the management of the airway, circulation, dysrthymias and metabolic state |  |
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| **Interpretation of clinical data and investigations in the assessment and management of critical care patients** | | |
| Is able to perform independently | Can obtain a history of the current condition and previous health status and perform an accurate clinical examination |  |
| Can undertake timely and appropriate investigations including microbiological sampling |  |
| Can perform, interpret and adjust respiratory management plans according to blood gas analysis |  |
| Within legal frameworks can order and interpret chest x-rays |  |
| Can monitor appropriate psychological functions and recognise and manage trends in variables |  |
| Can integrate clinical findings with laboratory investigations to form a differential diagnosis of organ dysfunction |  |
| Can initiate and manage basic organ support as defined in the Critical Care Minimum Dataset |  |
| Is able to perform under indirect supervision  (Indirect=onsite and off-site) | Can integrate clinical findings to advanced organ support after consultation with critical care consultant as defined in the Critical Care Minimum Dataset |  |
| Demonstrates knowledge of | Indications for Computerised Tomography (CT) imaging |  |
| Indications for Ultrasound Scan (USS) imaging |  |
| Indications for Magnetic Resonance Imaging (MRI) |  |
| Indications for Echocardiography (transthoracic/transoesophageal) |  |
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| **Diagnosis and disease management within the scope of critical care** | | |
| Is able to perform under indirect supervision (indirect = onsite and off-site) | Can manage the care of the critically ill patient and specific medical conditions |  |
| Can manage the care of the critically ill patient with chronic and co-morbid diseases and identify the implications of chronic disease on the critically ill patient |  |
| Can manage the patient with pulmonary infiltrates including acute lung injury syndromes (ALI/ARDS) and their causative factors |  |
| Can manage the care of the septic patient |  |
| Can identify and minimise factors contributing to impaired renal function |  |
| Can identify and minimise factors contributing to impaired liver function |  |
| Demonstrates knowledge of | How to manage a patient in the critical care environment following trauma |  |
| How to manage a patient in the critical care environment following burns |  |
| How to manage a patient in the critical care environment following spinal injuries |  |
| The implications of critical illness in the context of pregnancy |  |
| How to manage a patient in the critical care environment following intoxication with drugs or environmental toxins |  |
| How to identify and treat significant changes in raised intracranial pressure |  |
| How to manage a patient preparing for or following organ transplantation |  |
| How to manage a patient with a malignant disease |  |
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| **Therapeutic interventions/organ system support** | | |
| Is able to perform independently | Can independently prescribe drugs and therapies |  |
| Can manage and wean patients from invasive ventilator support |  |
| Can initiate, manage, and wean patients from non-invasive ventilator support |  |
| Can manage fluids and vasoactive drugs to support the circulation, including the drug groups vasopressors and inotropes |  |
| Can request and administer blood and blood products |  |
| Can correct electrolyte, glucose and acid-base disturbances |  |
| Can assess and prescribe nutritional support |  |
| Can manage continuous renal replacement therapy |  |
| Is able to perform under indirect supervision (indirect = onsite or off-site) | Can manage the care of the critically ill patient with specific acute medical conditions |  |
| Can initiate invasive ventilator support |  |
| Can initiate continuous renal replacement therapy |  |
| Can manage antimicrobial drug therapy in consultation with appropriate medical teams |  |
| Can manage multiple organ dysfunction (MODS) and the interactions between organ system support interventions |  |
| Demonstrates knowledge of | Mechanical assist devices to support the circulation |  |
| Is able to prescribe blood and blood related products |  |
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| **Practical procedures** | | |
| Is able to perform independently | Can perform comprehensive airway assessment |  |
| Can perform emergency airway management to ALS provider standard |  |
| Can initiate and manage oxygen administration devices |  |
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| Can initiate and manage appropriate methods for measuring cardiac output and derived haemodynamic variables |  |
| Can perform peripheral venous catheterisation |  |
| Can perform central venous catheterisation, including renal replacement catheters, using USS and landmark techniques |  |
| Can perform arterial catheterisation and arterial blood sampling |  |
| Can perform external cardiac pacing |  |
| Can perform defibrillation and cardioversion |  |
| Can perform electrocardiography (ECG) |  |
| Can perform nasogastric tube placement in a critically ill patient |  |
| Can perform urinary catheterisation |  |
| Demonstrates knowledge of | How to recognise and manage difficult intubation |  |
| How to manage a failed intubation |  |
| How to perform thoracocentesis via a chest drain for pleural effusions using Seldinger technique |  |
| Invasive and non-invasive methods of measuring cardiac output |  |
| The principles of Sengstaken tube use (or equivalent) and placement and the management of portal hypertension |  |
| The indications for and safe conduct of gastroscopy |  |
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| **Peri-operative care** | | |
| Is able to perform under indirect supervision (Indirect = onsite and off-site | Can manage and optimise the pre-operative care of the high risk patient |  |
| Can manage and optimise the pre-operative care of the elective risk patient |  |
| Can manage the post-operative care of the patients following high risk, emergency and elective surgery |  |
| Demonstrates knowledge of | How to manage the care of the patient following cardiac surgery |  |
| How to manage the care of the patient following craniotomy |  |
| How to manage the care of the patient following solid organ transplantation |  |
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| **Patient comfort and psychological care** | | |
| Is able to perform independently | Can identify and aim to minimise psychological sequelae of critical illness for patients and dependents |  |
| Can recognise the risks of sedative and neuromuscular drugs in the critically ill patient and limitations of assessment in the setting of multiple organ dysfunction or failure |  |
| Can manage the appropriate use of sedation and neuromuscular blockade, including assessment of both |  |
| Is able to perform under indirect supervision (indirect = onsite and off-site) | Can manage the assessment, prevention and treatment of pain including the use and prescription of patient controlled analgesia |  |
| Can manage the administration of analgesia via an epidural catheter including top-up analgesia, the management of overdose and inappropriate placement |  |
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| **Discharge planning and rehabilitation** | | |
| Is able to perform independently | Can identify and minimise the long term consequences of critical illness |  |
| Can inform patients and carers about the requirements for continuing care after discharge from critical care |  |
| Can manage the safe and timely discharge of patients from the ICU/HDU |  |
| Demonstrates knowledge of | The physical and psychological challenges for rehabilitation |  |
| The significance and relevance of critical care patient follow-up both within hospital and following discharge |  |
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| **End of life care** | | |
| Is able to perform independently | Can manage the appropriate aspects of the procedure for withholding or withdrawing treatment once agreed with the multidisciplinary team |  |
| Can communicate care plans and discuss end of life care with patients and their dependants |  |
| Can manage the process of palliative care of the critically ill patient |  |
| Is able to perform under direct supervision | Can optimise organ function ready for brain death testing |  |
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| **Patient transport** | | |
| Demonstrates knowledge of | Transport of the critically ill patient outside the ICU/HDU including the mechanically ventilated and spontaneously breathing patient in accordance with local guidelines and standards |  |
| **Professional core competences** | | |
| **Patient safety and healthcare system management** | | |
| Is able to perform independently | Can participate in a daily ward round as part of the multidisciplinary team |  |
| Can comply with local infection control measures |  |
| Can identify environmental hazards and promote safety for patients and staff |  |
| Can identify and minimise risk of critical incidents and adverse events |  |
| Can organise a case conference with multidisciplinary team involvement |  |
| Can apply protocols, guidelines and care bundles |  |
| Can apply appropriate critical care scoring systems for assessment of severity of illness, case mix and workload |  |
| Can demonstrate an understanding of the Advanced Practitioner position within the wider and local organisation including clinical responsibilities, levels of accountability and systems of working |  |
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| **Professionalism** | | |
| Is able to perform independently | Can communicate effectively with patients, relatives and carers |  |
| Can communicate effectively with members of the multi-professional healthcare team and other agencies |  |
| Can maintain accurate and legible records |  |
| Can involve patients, dependents and carers in decisions about care and treatment as appropriate to the critical setting |  |
| Can respect cultural and religious beliefs and demonstrate an awareness of the impact of these beliefs on care of the critically ill patient and their dependents and carers |  |
| Can ensure patient confidentiality and apply legal frameworks related to patient information |  |
| Can take responsibility for safe patient care appropriate to level of practice |  |
| Can formulate clinical decisions within their area of practice with respect for ethical and legal principles in the multidisciplinary team context |  |
| Is aware of the implications of consent and relevant issues as applied to the critical care environment |  |
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| **Leadership core competences** | | |
| **Professional relationships with members of the healthcare team** | | |
| Is able to perform independently | Can collaborate, consult and promote team-working |  |
| Can ensure continuity of care through effective communication with the multidisciplinary team |  |
| Can appropriately supervise, and delegate to others, the delivery of patient care as appropriate to their level of expertise and practice |  |
| Can support clinical staff outside the critical care unit to enable the delivery of effective care as appropriate to the Advanced Critical Care Practitioner scope and level of expertise |  |
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| **Development of clinical practice** | | |
| Is able to perform independently | Can seek learning opportunities and integrates new knowledge into clinical practice, including that of clinical decision making |  |
| Can take a lead to develop clinical and professional practice relevant to the role in order to ensure the delivery of high quality best practice care |  |
| Can participate in research, audit and quality improvement activities under supervision |  |
| Can support patients (and their dependants and carers, as appropriate) in understanding the evidence base for their care and clinical management in terms of their personal circumstances |  |
| **Teaching and supervising core competences** | | |
| **Participates in multidisciplinary teaching and assessments of others** | | |
| Is able to perform independently | Can participate in the educational activities and teaching of the multidisciplinary team and other groups appropriate to the role and level of knowledge |  |
| Can deliver teaching sessions on an aspect of the clinical practice relevant to the local setting, utilising appropriate preparation and teaching methods |  |
| Can maintain accurate and legible education and training records and documentation |  |
| Can take responsibility and participate in the continuing professional development of staff and others relevant to the role and position within the organisation |  |
| Can demonstrate a learner-centred approach to practice by facilitating and supporting the learning of other students, trainees and colleagues |  |
| Demonstrates knowledge of | The basic principles of how adults learn |  |